## COMMONWEALTH OF MASSACHUSETTS DEPARTMENT OF INDUSTRIAL ACCIDENTS

# TREATMENT GUIDELINES EFFECTIVE JULY 1, 1993

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## GUIDELINE NUMBER 22 - SURGERY FOR CERVICAL RADICULOPATHY FOR ENTRAPMENT OF A SINGLE NERVE ROOT

### I. Conservative Care:

- **A.** 6-8 weeks minimum for example:
  - 1. physical therapy
  - 2. non-steroid anti-inflammatory agents
  - 3. cervical traction

#### **AND**

## II. <u>Clinical Findings</u>:

- A. Subjective
  - 1. Sensory symptoms in a dermatomal distribution (could include: radiating pain, paraesthesia, tingling, burning, or numbness)

#### **AND**

- **B.** Objective
  - 1. Dermatomal sensory deficit; or
  - 2. Motor deficit; or
  - 3. Reflex changes; or
  - 4. Positive EMG

#### **AND**

- C. Imaging
  - 1. Abnormal test results that correlate with the level of nerve root involvement consistent with subjective and objective findings. Tests could include CT scan, MRI, or Myelogram.

## **III.** Special Instructions:

- A. Cases to be referred to a physician advisor:
  - 1. Repeat surgery at same level
  - 2. Request for surgery at the C#-4 level
  - 3. Requests for surgery with signs and symptoms indicating myelopathy
- **B.** When requesting authorization for decompression of multiple level nerve roots, each level is subject to the criteria.